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Deliver to: John M. Winter, USPTO Art Group: 3621
Facsimile No.: 703-872-9306 Date: March 7, 2005
From: William W. Schaal, Reg. No. 39,018
Our Docket No.: 80398P217 Number of pages 13 including this sheet.
Application No.: 09/437,590 Filing Date: 11/9/1999
Docket Due Date(s): _____

Enclosed are the following documents:

<input checked="" type="checkbox"/> Amendment: <u>Preliminary</u> (<u>9</u> pgs)	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Appeal Brief (_____ pgs)	<input type="checkbox"/> Notice of Appeal
<input type="checkbox"/> Application: _____ (_____ pgs) w/cover & abstract	<input type="checkbox"/> Petition for: _____
<input type="checkbox"/> Assignment & Cover Sheet (_____ pgs)	<input type="checkbox"/> Request for Continued Examination (RCE)
<input type="checkbox"/> Certificate of _____	<input type="checkbox"/> Reply Brief (_____ pgs)
<input type="checkbox"/> Continued Prosecution Application (CPA)	<input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i)
<input type="checkbox"/> Declaration & POA (_____ pgs)	<input type="checkbox"/> Request to Rescind Previous Nonpublication Request
<input type="checkbox"/> Drawings: _____ sheets, _____ figures	<input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter
<input type="checkbox"/> Extension of Time: _____	<input type="checkbox"/> Response to Written Opinion (_____ pgs)
<input checked="" type="checkbox"/> Fee Transmittal (in duplicate)	<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> IDS & PTO/SB/08 (_____ pgs)	<input type="checkbox"/> Transmittal of Publication Fee Due
<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Transmittal Letter

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8A)

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Susan McFarlane
Susan McFarlane

3/7/2005

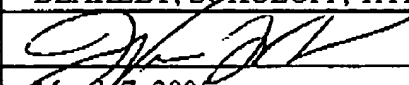
Date

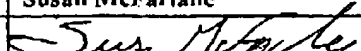
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application No.	09/437,590	
		Filing Date	November 9, 1999	
		First Named Inventor	Brant L. Candalore	
		Art Unit	3621	
		Examiner Name	John M. Winter	
Total Number of Pages in This Submission		12	Attorney Docket Number	80398P217

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 60px; width: 100%;"></div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	William W. Schaal, Reg. No. 39,018 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	March 7, 2005

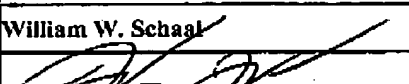
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Typed or printed name	Susan McFarlane		
Signature		Date	March 7, 2005

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 08/04/2004.
 SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL for FY 2005 <small>Patent fees are subject to annual revision.</small>		Complete if Known		
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Application Number		
		Filing Date		
		First Named Inventor		
		Examiner Name		
		Art Unit		
TOTAL AMOUNT OF PAYMENT		(\$)	0.00	
		Attorney Docket No.		

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2666</u> Deposit Account Name: <u>Blakely, Sokoloff, Taylor & Zafman LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION																																													
1. EXTRA CLAIM FEES																																													
Total Claims		Extra Claims		Fee from below	Fee Paid																																								
24		72*		0	0.00																																								
Independent Claims		8*		0	0.00																																								
Multiple Dependent																																													
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1202</td> <td>50</td> <td>2202</td> <td>20</td> <td>Claims in excess of 20</td> </tr> <tr> <td>1201</td> <td>200</td> <td>2201</td> <td>100</td> <td>Independent claims in excess of 3</td> </tr> <tr> <td>1203</td> <td>300</td> <td>2203</td> <td>180</td> <td>Multiple Dependent claim, if not paid</td> </tr> <tr> <td>1204</td> <td>300</td> <td>2204</td> <td>150</td> <td>**Reissue independent claims over original patent</td> </tr> <tr> <td>1205</td> <td>300</td> <td>2205</td> <td>150</td> <td>**Reissue claims in excess of 20 and over original patent</td> </tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL (1)</td> <td>(\$)</td> <td>0.00</td> </tr> </tbody> </table>						Large Entity		Small Entity		Fee Description	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1202	50	2202	20	Claims in excess of 20	1201	200	2201	100	Independent claims in excess of 3	1203	300	2203	180	Multiple Dependent claim, if not paid	1204	300	2204	150	**Reissue independent claims over original patent	1205	300	2205	150	**Reissue claims in excess of 20 and over original patent	SUBTOTAL (1)				(\$)	0.00
Large Entity		Small Entity		Fee Description																																									
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1204	300	2204	150	**Reissue independent claims over original patent																																									
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SUBTOTAL (1)				(\$)	0.00																																								
*or number previously paid, if greater. For Reissues, see below																																													
2. ADDITIONAL FEES																																													
Large Entity		Small Entity		Fee Description	Fee Paid																																								
Fee Code	Fee (\$)	Fee Code	Fee (\$)																																										
1051	130	2051	65	Surcharge - late filing fee or oath																																									
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet																																									
2053	130	2053	130	Non-English specification																																									
1251	120	2251	90	Extension for reply within first month																																									
1252	450	2252	225	Extension for reply within second month																																									
1253	1,020	2253	510	Extension for reply within third month																																									
1254	1,590	2254	765	Extension for reply within fourth month																																									
1255	2,160	2255	1,080	Extension for reply within fifth month																																									
1401	500	2401	250	Notice of Appeal																																									
1402	500	2402	250	Filing a brief in support of an appeal																																									
1403	1,000	2403	500	Request for oral hearing																																									
1451	1,510	2451	1,510	Petition to institute a public use proceeding																																									
1450	130	2450	130	Petitions to the Commissioner																																									
1807	60	1807	60	Processing fee under 37 CFR 1.17(a)																																									
1808	180	1808	180	Submission of Information Disclosure Stmt																																									
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.128(a))																																									
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.128(b))																																									
Other fee (specify): _____																																													
SUBTOTAL (2)				(\$)																																									

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	William W. Schaaf	Registration No. (Attorney/Agent)	39,018
Signature		Telephone	(714) 557-3800
		Date	03/07/05

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/r) 12/15/2004.
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Appl. No. 09/437,590
Amdt. Dated 03/07/05
Preliminary Amendment

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application. No. :	09/437,590	Confirmation No. 8195
Applicant :	Brant L. Candelore	
Filed :	11/09/1999	
TC/A.U. :	3621	
Examiner :	John M. Winter	
Docket No. :	080398.P217	
Customer No. :	8791	

Commissioner for Patents
PO Box 1450
Alexandria VA 22313-1450

PRELIMINARY AMENDMENT

Sir:

Applicant respectfully requests amendment of the above-identified Patent Application as follows:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begin on page 9 of this paper.